## Interim Designation of Agent to Receive Notification of Claimed Infringement

Full Legal Name of Service Provider: PaperExchange.com, LLC
Alternative Name(s) of Service Provider (including all names under which the service provider is doing business):
Address of Service Provider: 545 Boy/STON ST BOSTON MA 02/1
Name of Agent Designated to Receive  Notification of Claimed Infringement: Designated Designated to Receive
Full Address of Designated Agent to which Notification Should be Sent (a P.O. Box or similar designation is not acceptable except where it is the only address that can be used in the geographic location):  Paper Exchange. Com Le 545 Boy/5 row 57 8th Floor Boston Ma 02/16 Arta Duage Designa
Telephone Number of Designated Agent: 6/2 - 536-4/3/0
Facsimile Number of Designated Agent: 6/7-536-4097
Email Address of Designated Agent: ddesism @paperexcharge .Com
Signature of Officer or Representative of the Designating Service Provider:  Date: 12/10/85  Typed or Printed Name and Title: DUAJE DOSIGO CFO

Note: This Interim Designation Must be Accompanied by a \$20 Filing Fee Made Payable to the Register of Copyrights.

## **RECEIVED**

JAN 0 7 2000

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